

Office of Health Care Quality

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 02AL0247	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/21/2013
NAME OF PROVIDER OR SUPPLIER REGENCY PARK ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 730 MARYLAND ROUTE 3 SOUTH GAMBRILLS, MD 21054		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
E 000	Initial Comments The following deficiencies are the result of an unannounced re-licensure survey conducted on August 19 and 21, 2013 for the purpose of determining the facility's compliance with COMAR 10.07.14, Assisted Living Program regulations. Survey activities included a tour of the facility, review of 5 resident and 6 staff records, interview of residents and staff, observation of resident care, and review of facility procedures, policies, and administrative records. The facility's census at the time of survey was 54 residents.	E 000		
E2370	.16 A,B,C Assisted Living Manager Training Requirements .16 Assisted Living Managers-Training Requirements. A. In addition to the requirements in Regulation .15 of this chapter, by January 1, 2006, an assisted living manager of a program that is licensed for five beds or more shall complete a manager training course that is approved by the Department. B. The completed manager's training course shall: (1) Consist of at least 80 hours of course work and include an examination; (2) Consist of training programs that include direct participation between faculty and participants; and (3) Include not more than 25 hours of training through Internet courses, correspondence courses, tapes, or other training methods that do not require direct interaction between faculty and participants. C. An assisted living manager employed in a program that is licensed for five or more beds shall complete 20 hours of Department-approved continuing education every 2 years.	E2370		

OHCQ
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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E2370	Continued From page 1 This REQUIREMENT is not met as evidenced by: Based on staff record review and staff interview, the facility failed to provide evidence of the Assisted Living Manager's (ALM's) continuing education. Findings include: Staff record review and interview of the ALM failed to reveal evidence of the ALM's completion of 20 hours of continuing education.	E2370		
E2780	.20 C .20 Delegating Nurse C. Duties. The delegating nurse shall: (1) Be on-site to observe each resident at least every 45 days; (2) Be available on call as required under this chapter or have a qualified alternate delegating nurse available on call; and (3) Have the overall responsibility for: (a) Managing the clinical oversight of resident care in the assisted living program; (b) Issuing nursing or clinical orders, based upon the needs of residents; (c) Reviewing the assisted living manager's assessment of residents; (d) Appropriate delegation of nursing tasks; and (e) Notifying the OHCQ: (i) If the delegating nurse's contract or employment with the assisted living program is terminated; and (ii) Of the reason why the contract or employment was terminated. This REQUIREMENT is not met as evidenced by:	E2780		

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E2780	Continued From page 2 Based on resident record review and staff interview, the facility failed to ensure the Delegating Nurse (DN) appropriately delegated nursing tasks (by assessing the resident before delegating). Findings include: Resident record review and interview of the ALM failed to reveal evidence that the DN assessed residents prior to delegating tasks. Examples include: 1) Resident #4 was admitted 6-3-13. The DN's initial assessment was dated 6-9-13; and 2) Resident #1 was admitted 10-31-12. The DN's initial assessment was dated 11-3-12.	E2780		
E3360	.26 C1 .26 Service Plan C. The assisted living manager, or designee, shall ensure that: (1) A written service plan or other documentation sufficiently recorded in the resident's record is developed by staff, which at a minimum addresses: (a) The services to be provided to the resident, which are based on the assessment of the resident; (b) When and how often the services are to be provided; and (c) How and by whom the services are to be provided; This REQUIREMENT is not met as evidenced by: Based on resident record review and staff interview, the facility failed to ensure service plans address services to be provided based on resident assessments. Findings include:	E3360		

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E3360	Continued From page 3 Resident record review and interview of the ALM revealed the service plans for Residents #1, #2, #3, and #4 failed to address services to be provided based on the residents' assessments.	E3360		